UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

Form A
For use by Members, officers, and employees

HAND DELIVERED

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U.S. HOUSE OF REPRESENTATIVES

MC
(Office Use Only)

Name: Elton Gallegly   **Daytime Telephone:** 202-225-5811

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 24	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15, 2012)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[X]	[ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $350 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $350 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	[ ]	[X]

Name ELTON GALLEGLY

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. See examples below.
Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	DYNAMIC REALTY	SPOUSE SALARY	NA
	GALLEGLY FOR CONGRESS	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name ELTON GALLEGLY | Page 3 of 6

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than $200 in "unearned" income during the year.

Provide complete names of stocks and mutual funds (do not use ticker symbols.)

For **all IRAs** and other retirement plans (such as 401(k) plans) that are self-directed (*i.e.*, plans in which you have the power, *even if not exercised*, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.

For rental or other real property held for investment, provide a complete address.

For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Exclude: Your personal residence, including second homes and vacation homes (*unless* there was rental income during the reporting period); any deposits totaling $5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.

For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.

BLOCK B — Value of Asset

Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments *or* that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. **Dividends, interest, and capital gains, even if reinvested, must be disclosed as income.** Check "None" if the asset generated no income during the reporting period.

BLOCK D — Amount of Income

For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. **Dividends, interest, and capital gains, even if reinvested, must be disclosed as income.** Check "None" if no income was earned or generated.

BLOCK E — Transaction

Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding $1,000 in reporting year.

If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.

P, S, E

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
Examples: SP	Mega Corp. Stock					X									X			X							X								S (partial)
Examples:	Simon & Schuster		Indefinite																		Royalties									X			
Examples:	1st Bank of Paducah, KY Accounts						X									X											X						
JT	1791 ERRINGER ROAD SIMI VALLEY, CA 93065								X							X												X					
JT	1491 DUARTE CIRCLE SIMI VALLEY, CA 93065							X								X												X					
JT	12 VIA SANTANELLA RANCHO MIRAGE, CA								X							X												X					
* SP	SHRADER FAMILY TRUST 6335 GITANA CAMARILLO, CA						X									X											X						
* SP	SHRADER FAMILY TRUST CHASE BANK			X													X						X										
SP	DYNAMIC REALTY			X																		NA											

* INHERITANCE – REPRESENTS SPOUSES PORTION OF THE INHERITANCE

For additional assets and unearned income, use next page.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ELTON GALLEGLY

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income								BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	UNION BANK				X																												
JT	CHASE BANK				X																												
	KEOUGH - WELLS FARGO CASH ACCT			X																													
	IRA-MERRILL LYNCH / B of A																																
	ALLIANCE BERNSTEIN GROWTH				X										X									X									
	CALAMIGOS GROWTH				X													X							X								
	JOHN HANCOCK US GLOBAL				X													X						X									
	BLACKROCK VALUE				X																												
	BLACKROCK CAPITAL				X																												
	COCA COLA			X											X								X										
	ML MONEY MARKET			X																													
SP	IRA-PERSHING																																
	AMGEN					X									X									X									
	COCA COLA			X											X								X										
	MONEY MARKET			X													X						X										
SP	CHASE BANK				X												X						X										
JT	MIDLAND PROPERTY LTD	X												X								X											S
	PTR XXIII WHO OWNS AFFORDABLE HOUSING AT CENTRAL AVE. & CENTURY COURT IN CENTRAL, COLORADO AND WHO OWNS SENIOR HOUSING AT 1615 "O" STREET, SACRAMENTO, CA 95814																																

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Name ELTON GALLEGLY

SCHEDULE IV— TRANSACTIONS

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded $1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (*i.e.,* "partial sale").** See example below.

Capital Gains — if a sales transaction resulted in a capital gain in excess of $200, check the "capital gains" box and disclose this income on Schedule III.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Check Box if Capital Gain Exceeded $200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	A $1,001-$15,000	B $15,001-$50,000	C $50,001-$100,000	D $100,001-$250,000	E $250,001-$500,000	F $500,001-$1,000,000	G $1,000,001-$5,000,000	H $5,000,001-$25,000,000	I $25,000,001-$50,000,000	J Over $50,000,000
SP	*Example:* Mega Corporation Common Stock (partial sale)		X			10–12–11		X								
JT	MIDLAND PROPERTY LTD PTR XXIII		X			12-31-11	0 LOSS ON INVESTMENT	EXACT AMOUNT OF TRANSACTION UNKNOWN - NO NET PROCEEDS								

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SCHEDULE V— LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded $10,000. **NOTE:** Pending legislation may require Members to report mortgages on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred Mo/Year	Type of Liability	A $10,001-$15,000	B $15,001-$50,000	C $50,001-$100,000	D $100,001-$250,000	E $250,001-$500,000	F $500,001-$1,000,000	G $1,000,001-$5,000,000	H $5,000,001-$25,000,000	I $25,000,001-$50,000,000	J Over $50,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				X						
JT	FIRST CALIFORNIA BANK P.O. BOX 2838 TORRANCE, CA	9/2009	MORTGAGE 1791 ERRINGER, SIMI VALLEY, CA					X					
JT	FIRST CALIFORNIA BANK P.O. BOX 2838 TORRANCE, CA	8/2009	MORTGAGE 1491 DUARTE CIRCLE, SIMI VALLEY					X					
JT	METLIFE HOME LOANS 4000 HORIZON WAY, IRVINE, TX	5/2009	MORTGAGE 12 VIA SANTANELLA, RANCHO MIRAGE					X					
JT	GATEWAY BANK P.O. BOX 77404 EWING, NJ	9/2011	MORTGAGE - PERSONAL RES. (NOT RENTED) SIMI VALLEY, CA						X				
JT	FIRST CALIFORNIA BANK P.O. BOX 2838 TORRANCE, CA	3/2010	HELOC - PERSONAL RES (NOT RENTED) SIMI VALLEY CA			X							
JT	CHASE. PO BOX 78035 PHOENIX, AZ	10/2005	HELOC - PERSONAL RES (NOT RENTED) ARLINGTON, VA					X					

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $350 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $140 or less need not be added towards the $350 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	$375
NONE		

Use additional sheets if more space is required.